FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL	
OMB Number: 3235-0076	
Expires: April 30, 2008	
Estimated average burden	
hours per response	16 00

SEC USE	ONLY
Prefix	Serial
DATE RE	CEIVED
	1

Name of Offering ( Check if this is an amendment and name has changed, and indicate change.)		
iVital, Inc., Common Stock and Convertible Promissory Notes		
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6)	ULOE
Type of filing: New Filing Amendment		
A. BASIC IDENTIFICATION DAT	`A	) / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1. Enter the information requested about the issuer		
Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)		
iVital, Inc.		07079751
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (li	
25 Highland Park Village, No. 100-548, Dallas, Texas 75205	(214) 432-5889	
Address of Principal Business Operations (Number and Street, City, State, Zip Code)		
(if different from Executive Offices)		
	Telephone Number (Inc	cluding Area Code)
Brief Description of Business		PROCESSED
		11100200==
Weight management programs featuring surgical procedures.		OCT 15 2007
Type of Business Organization		337 - 3 230,
□ Corporation    □ limited partnership, already formed    □	other (please specify):	<b>THOMSON</b>
business trust limited partnership, to be formed		FINANCIAL
Month Year		
Actual or Estimated Date of Incorporation or Organization:  0  9  0  7	☐ Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for S		
CN for Canada; FN for other foreign jurisdiction)	D	E

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When to File: A Notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption.	Conversely, failure to file the appropriate
5. dend asting will not result in a loss of an available state exemption unless such exemption is	predicated on the filing of a federal natice.

ATTENTION

		A. BASIC IDENTI	FICATION DATA		
2. Enter the information req	uested for the following	ng:			
<ul> <li>Each beneficial own</li> <li>Each executive office</li> </ul>	ner having the power t	porate issuers and of corporate	ast five years; vote or disposition of, 10% or mor general and managing partners of	e of a class of equity se partnership issuers; and	curities of the issuer;
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner		□ Director	General and/or Managing Partner
David L. Bryant					
Full Name (Last name first, if					
25 Highland Park Village, No Business or Residence Address				_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Erik J. Kraemer Full Name (Last name first, if	individual)				
·		neade			
25 Highland Park Village, No Business or Residence Address					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)			<del></del>	
Business or Residence Address	s (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
					Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
D : D : I		C': C: 2': C: 1)		· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addres	s (Number and Street,	City, State, 21p Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	indiviđual)				
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·

				B. 1?	NFORMATI	ON ABOUT	OFFERING	;				
											Yes	No
1. Has the is	suer sold, or	does the issue	r intend to se	ll, to non-acc	redited invest	ors in this of	fering?			.,,,,		⋈
	,				in Appendix,							
2. What is th	ne minimum i	nvestment tha	at will be acce								\$	25,000.00
				•	•						Yes	No
3. Does the	offering perm	it joint owner	ship of a sing	le unit?			*,**,************				$\boxtimes$	
4 Enter the	information	requested fo	r each person	who has be	en or will be	paid or give	n, directly or	indirectly, a	ny commissi	on or similar		
remunera	ation for solic	itation of pu	rchasers in co	nnection wit	h sales of sec	curities in th	e offering. I	f a person to	be listed is a	an associated		
person of	r agent of a b	roker or deale	r registered v	vith the SEC	and/or with a	state or state	s, list the nar	ne of the brol	cer or dealer.	If more than		
five (5) ponly.	persons to be	listed are as:	sociated perso	ons of such a	broker or de	aler, you ma	y set forth tr	ie informatio	n ior inai dio	ker or dealer		
Full Name (I	act name fire	t if individue		<u>.</u>								<del></del>
Not Applical		a, ii iiiuiviuud	11 <i>)</i>									
Business or R		trece (Numb	er and Street	City State 7	in Code)							
Business of K	esidence Au	aress (Marilo	er and Succe,	City, Diate, 2	ip code,							
Name of Asso	ociated Broke	r or Dealer								·		<del></del>
	• • • • • • • • • • • • • • • • • • • •											
States in Whi	ich Person Lis	sted Has Solid	ited or Intend	Is to Solicit P	urchasers				•			
(C	heck "All Sta	ates" or check	individual S	tates)			**************				☐ Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name firs	t, if individua	l)						•			
Business or R	esidence Add	lress (Numbe	r and Street,	City, State, Z	ip Code)							
Name of Asso	ciated Broke	r or Dealer				•						
States in Whie											С .	II States
•									(121.3		_	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID] [MO]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN] {OK]	[MS] [OR]	[MO] [PA]
[MT]	(NE)	[NV]	[NH]	[NJ]	(NM)	[NY]	[NC]	[ND]	[OH]	[WI]	[WY]	[PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	{ w1]	[** 1]	[FK]
Full Name (L	ast name nrs	t, it individus	ш}									
Business or R	esidence Ado	Iress (Numbe	er and Street	City State 7	in Code)		_			·		
Dusiness of it	esidence Auc	iress (reamer	. wid bucci,	City, Ctare, 2	.p cout,							
Name of Asso	ciated Broke	r or Dealer										
States in Whi	ch Person Lis	ted Has Solic	ited or Intend	ls to Solicit P	urchasers							
(C	heck "All Sta	ites" or check	individual St	ates)								di States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RJ]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Sold Offering Price Type of Security 16,500.00 \$ Equity......\$ ☐ Common ☐ Preferred Partnership Interests ....... )......**S** 0 Other (Specify \_ 1,666,500 \$ 1.262,500 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors 1,262,500 Accredited Investors Non-accredited Investors. Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Security Sold Type of offering Rule 505 Regulation A Rule 504..... S Total ..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Printing and Engraving Costs..... \$35,000.00 Legal Fees...... S Accounting Fees..... Engineering Fees..... Sales Commissions (specify finders' fees separately) 0 Other Expenses (identify): Reimbursement of purchasers' expenses ....... Total ..... 35,000.00

C. OFFERING PR	CE, NUMBER OF INVESTORS, EXPENS	ES AN	D US	SE OF PROCEEDS			
b. Enter the difference between the aggregate presponse to Part C – Question 4.a. This difference	rice given in response to Part C – Question 1 is the "adjusted gross proceeds to the issuer."	and to	tal e	xpenses furnished in	\$		1,227,500
5. Indicate below the amount of the adjusted gro purposes shown. If the amount for any purpose is estimate. The total of the payments listed must be to Part C - question 4.b above.	not known, furnish an estimate and check the	box to	the	left of the			
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and fees			\$			s _	
Purchase of real estate			\$	<del>-</del>		s _	
Purchase, rental or leasing and installation of made	chinery and equipment		\$			s_	<u> </u>
Construction or leasing of plant buildings and fac			\$			s _	
Acquisition of other businesses (including the val may be used in exchange for the assets or securiti			\$			\$	
Repayment of indebtedness			\$			s -	
Working capital	***************************************		\$		- ⊠	s -	1,227,500.00
Other (specify): Inventory, Training/ Travel Exp	enses		\$			<b>s</b> –	-
Column Totals			\$	<del></del>		<b>s</b> –	-
Total Payments Listed (column totals added)				⊠ \$		1,227	,500.00
	D. FEDERAL SIGNATURE						
The issue has duly caused this notice to be signed by t an undertaking by the issuer to furnish to the U.S. Secu- non-accredited investor pursuant to paragraph (b)(2) of	rities and Exchange Commission, upon written	notice reque	is file st of	ed under Rule 505, the informat	ne follo ion fur	wing s nished	signature constitutes by the issuer to any
Issuer (Print or Type)	Signature			Date	1 .		
iVital, Inc.	1 Jan			(0)3	0	7	
Name of Signer (Print or Type)	Title of Saner (Print or Type)			<del></del>			
David L. Bryant	President						
						·	-
	ATTENTION						
Intentional misstatements or	omissions of fact constitute federal cri	ninal	viola	ations. (See 18 U.	S.C. 1	001.)	

		E CTATE CONATURE		
		E. STATE SIGNATURE		
			Yes	No
1.	Is any party described in 17 CFR 230.262 present	tly subject to any of the disqualification provisions of such rule?		$\boxtimes$
		See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furr such times as required by state law.	hish to any state administrator of any state in which this notice is filed, a notice on Form D (I	7 CFR 23	9.500) at
3.	The undersigned issuer hereby undertakes to furn	ish to the state administrators, upon written request, information furnished by the issuer to off	ferees.	
4.		is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited ( and understands that the issuer claiming the availability of this exemption has the burden		
The perso		tents to be true and has duly caused this notice to be signed on this its behalf by the undersign	ned duly a	uthorized
Issue	er (Print or Type)	Signature Date		
iVita	al, Inc.	10/3/07		
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type)		
Dav	id L. Bryant	President		

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPEND	IX				
1	Intend to s	sell to non- investors in B – Item 1)	Type of security and aggregate offering price offered in state (Part C – ltem 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E - Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK				<del></del>			1.		
AZ		<u> </u>							
AR		ļ							
CA		x	Common Stock and Convertible Promissory Note	2	\$175,000				x
со		х	Common Stock and Convertible Promissory Note	1	\$25,000				х
СТ		x	Common Stock and Convertible Promissory Note	2	\$500,000				х
DE				···					
DC		<del></del>							
FL		x	Common Stock and Convertible Promissory Note	2	\$75,000				х
GA		х	Common Stock and Convertible Promissory Note	1	\$25,000				х
НІ									
ID				···					
IL		x	Common Stock and Convertible Promissory Note	2	\$50,000				х
IN		-							
lA									
KS									
KY									
LA								<u> </u>	
ME		-							
MD	<u>.</u>								
MA									
MI							-		
MN									
MS					-				
МО									

					APPENDIX						
l		2	3								
	non-acc	o sell to credited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C - Item 1)		Type of investor and amount purchased in State (Part C - Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT		,,,,							,		
NE					·						
NV											
NH											
KI		х	Common Stock and Convertible Promissory Note	l	\$25,000				x		
NM		:									
NY		х	Common Stock and Convertible Promissory Note	1	\$50,000				x		
NC											
ND							-···				
ОН											
OK							<u>-</u>				
OR											
PA		х	Common Stock and Convertible Promissory Note	1	\$25,000			<u> </u>	x		
RI											
SC											
SD									-		
TN			0. 1						-		
TX		х	Common Stock and Convertible Promissory Note	8	\$300,000				x		
UT											
VT									ļ		
VA											
WA											
WI							<del></del>		<u> </u>		
WY						<u> </u>			<u> </u>		
			]						<u> </u>		

